

HB09-1293 Oversight and Advisory Board Hospital Provider Fee Meeting Notes

225 East 16th Avenue, Conference Room 6 A/B

March 17, 2015

1. Call to Order

David Livingston called the meeting to order at 3:40 p.m.

2. Roll Call

There were sufficient members for a quorum.

A. Members Present

David Livingston, Bill Heller, Jeremiah Bartley, Ann King, Tom Rennell, John Gardner, Jim Shmerling, Chris Underwood

B. Members on the Phone

George O'Brien, Dan Enderson, Peg Burnette, Kathryn Ashenfelter

C. Members Excused

Mirna Castro

D. Staff Present

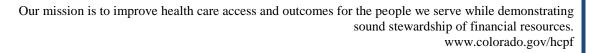
Nancy Dolson, Matt Haynes, Jeff Wittreich, Kevin Berg, Cynthia Miley, Cindy Arcuri

3. Approval of Minutes

The minutes from the January 29, 2015 meeting were approved with corrections.

4. Review of Revised

- Will need new model fully approved by this Board and CMS before we can change what the hospitals are paying
- The Department did file a state plan amendment with CMS at end of December
- CMS has 90 days to respond, March 30th. We have reached out to let them know there may be changes



- Error in calculation of certain costs used in the upper payment limit and supplemental payments
- 10% decline in Medicaid and uninsured costs
- Significant decrease in net reimbursement for rural hospitals
- Looking to minimize impacts to Rural hospitals and safety net hospitals as much as possible
- Total Medicaid payments increased to 96% of UPL
- No changes in net reimbursement but some changes in specific supplemental payments
- Inpatient base rate payment changed to \$606,800,000
- No changes to other high volume payments
- OP payment calculated right from UPL calculation
- The Medicaid and uninsured cost will both affect their UPL
- Effort to try to draw down most of our DSH, currently almost at 100%
- If draw down all of DSH would have to lower other areas
- Over all total payment change is zero
- Lowering inpatient payment and DSH
- Will be doing a WebEx to help hospitals go through their rate letter
- Our intention is to get numbers to Board and hospitals up front
- The Department is in process of ending its contractual agreement with PCG for their work with the UCR
- We have multiple data sources that go into limit calculations
- The Department is prepared to move forward from scratch with a new vendor if need be
- Some hospitals costs were grossly understated and others costs were grossly overstated
- Goal is to still come up with a methodology that is sustainable
- For FY 14-15 still looking at net reimbursement
- Probably September or October before we have a proposed model for next year
- May or June before start bringing in calculations from Hospitals
- Errors were not in input from hospitals or MMIS the errors were from the calculations for getting to the cost

5. Public Comment

There was no public comment

6. Action Items

Jim Schmerling motioned to accept the 2014-15 model revision as proposed. Tom Rennel seconded. Motion passed.



7. The meeting was adjourned at 4:30 p.m.

The next scheduled meeting is at 3:00 p.m. on Tuesday, April 28, 2015 at 225 East 16th Avenue, Denver, CO in conference room 6 A/B.

